

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Shai Mohaban
678 Durshire Way
Sunnyvale, CA 94087

747 Durshire Way

2. Article Number (Copy from service label)

7000 1670 0006 8330 2865

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

16/09/05

C. Signature

X

 Agent
 AddresseeD. Is delivery address different from item 1? YesIf YES, enter delivery address below: No

3: Service Type

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

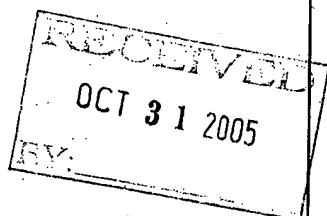
UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Christopher J. Brokaw
Hickman Palermo Truong & Becker
2055 Gateway Place, Suite 550
San Jose, CA 95110



Docket No. 5032540085

ccos

BEST AVAILABLE COPY